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PTO/SB/92 (08-00)

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09/536,137
FA0881 US NA
Amendment (8 pages)
Petition for Extension of Time (in duplicate)
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Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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	Complete if Known	
Application Number	09/536,137	
Filing Date	MARCH 28, 2000	77
First Named Inventor	BENTON ET AL.	*
Examiner Name	C. NGUYEN	3 3
Group / Art Unit	2171	717
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						Fee	Fee	Fee	Fee	Fee Description	Fee
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Account Number	-	04-192	8			1051	130	2051	65	Surcharge - late filing fee or oath	
						1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
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				d to: (check all that a		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
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		indicated b ed deposit a		, except for the filing	j iee to the	1251	110	2251	55	Extension for reply within first month	110
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			CAL	LCULATION		1253	930	2253	465	Extension for reply within third month	
		NG FEE				1254	1,450	2254	725	Extension for reply within fourth month	
Large Entit	ty	Small Entit	<u>y</u>			1255	1,970	2255	985	Extension for reply within fifth month	
	ee	Fee Fe	-	Fee Description		1401	320	2401	160	Notice of Appeal	
		Code (\$			Fee Paid	1402	320	2402	160	Filing a brief in support of an appeal	
	50	2001 37		Utility filing fee		1403	280	2403	140	Request for oral hearing	
	30 20	2002 16 2003 26		Design filing fee Plant filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1004 7	50	2004 37	75	Reissue filing fee		1452	110	2452	55	Petition to revive – unavoidable	
1005 16	60	2005 8	0	Provisional filling fee		1453	1,300	2453	650	Petition to revive – unintentional	
						1501	1,300	2501	650	Utility issue fee (or reissue)	
				SUBTOTAL (1)	(\$) 0.00	1502	470	2502	235	Design issue fee	
2. EXTRA	CL AIR	M FFFS				1503	630	2503	315	Plant issue fee	
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				Claims below	Paid	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
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Large Ent	Fee	Small En	Fee	Fee Des	scription	1810	740	2810	370	For each additional invention to be examined (37 CFR § 1.129(b))	
Code	(\$)	Code	(\$)			1801	750	2801	375	Request for Continued Examination	
1202	18	2202	9	Claims in excess of		l	, 50	-55.		(RCE)	
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			S	UBTOTAL (2) (\$)	0.00	*Redu	ced by B	asic Filir	ng Fee P	aid SUBTOTAL (3) (\$) 110.00	
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SUBMITTED BY				Co	omplete (if applicable)
Name (Print/Type)	STEVEN C. BENJAMIN	Registration No. (Attorney/Agent)	36,087	Telephone	(302) 992-2236
Signature	A-(A)	``		Date	7-10-02

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